

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>ma</i>		<i>9/5/01</i>
FORMALITY REVIEW	<i>FR</i>	<i>1018</i>	<i>9/28/01</i>
RESPONSE FORMALITY REVIEW	<i>A</i>	<i>676</i>	<i>05/08/02</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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Original	
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52	11/17/03
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Claim	Date
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If more than 150 claims or 10 actions  
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07/28/01